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## COVER SHEET FOR AMENDMENT OF POST-TRAVEL SUBMISSION

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**Instructions:** Use this form as a cover sheet for any paperwork you may need to submit to the **Office of Public Records** in order to make your Privately Sponsored Post-Travel Submission complete in accordance with Rule 35. **Only complete this form if you need to submit an amendment to a post-travel filing you have already submitted.**

**SUBMIT DIRECTLY TO THE OFFICE OF PUBLIC RECORDS IN 232 HART BUILDING**

Name of Traveler: Sarah Shapiro

Employing Office/Committee: Senator Chris Murphy

Travel Expenses Paid by (List all sources): Casey Family Programs

Travel Date(s): February 18, 2020 - February 19, 2020

Description/Title of Attached Forms: RE 2

Casey Family Programs Invitation

Purpose of Amendment (describe the reason for amending original submission): \_\_\_\_\_

The original submission was missing the invitation from Casey Family Programs and the RE-2 was missing the year of travel and the supervisor's signature.

4/17/2020

(Date)

Sarah Shapiro

(Signature of Traveler)



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Date/Time Stamp:

**EMPLOYEE PRE-TRAVEL AUTHORIZATION**

**Pre-Travel Filing Instructions:** Complete and submit this form at least 30 days prior to the travel departure date to the **Select Committee on Ethics** in SH-220. Incomplete and late travel submissions will **not** be considered or approved. This form **must** be typed and is available as a fillable PDF on the Committee's website at [ethics.senate.gov](http://ethics.senate.gov). Retain a copy of your entire pre-travel submission for your required post-travel disclosure.

Name of Traveler: Sarah ShapiroEmploying Office/Committee: Senator Chris MurphyPrivate Sponsor(s) (list all): Casey Family ProgramsTravel date(s): February 18 2020 - February 19, 2020

*Note: If you plan to extend the trip for any reason you **must** notify the Committee.*

Destination(s): New Orleans, Louisiana

Explain how this trip is specifically connected to the traveler's official or representational duties:

I am the office's Legislative Aide for child welfare and foster care and this visit will provide me with exposure to state-based efforts to reduce trauma in the child welfare system, improve permanency of foster care placements, and reduce unnecessary entry into the child welfare system.

Name of accompanying family member (if any): N/ARelationship to Employee: ☐ Spouse ☐ Child

I certify that the information contained in this form is true, complete and correct to the best of my knowledge:

4/17/20

(Date)

Sarah Shapiro

(Signature of Employee)

TO BE COMPLETED BY SUPERVISING SENATOR/OFFICER (President of the Senate, Secretary of the Senate, Sergeant at Arms, Secretary for the Majority, Secretary for the Minority, and Chaplain):

I, Senator Murphy hereby authorize Sarah Shapiro  
 (Print Senator's/Officer's Name) (Print Traveler's Name)

an employee under my direct supervision, to accept payment or reimbursement for necessary transportation, lodging, and related expenses for travel to the event described above. I have determined that this travel is in connection with his or her duties as a Senate employee or an officeholder, and will not create the appearance that he or she is using public office for private gain.

I have also determined that the attendance of the employee's spouse or child is appropriate to assist in the representation of the Senate. (signify "yes" by checking box) ☐

4/17/2020

(Date)

(Signature of Supervising Senator/Officer)



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## Employee Post-Travel Disclosure of Travel Expenses

**Post-Travel Filing Instructions:** Complete this form within 30 days of returning from travel. Submit all forms to the **Office of Public Records in 232 Hart Building.**

In compliance with Rule 35.2(a) and (c), I make the following disclosures with respect to travel expenses that have been or will be reimbursed/paid for me. I also certify that I have attached:

- ☒ The **original** *Employee Pre-Travel Authorization* (Form RE-1), **AND**  
☒ A **copy** of the *Private Sponsor Travel Certification Form* with all attachments (itinerary, invitee list, etc.)

Private Sponsor(s) (list all): Casey Family Programs

Travel date(s): February 18-19, 2020

Name of accompanying family member (if any): None

Relationship to Traveler: ☐ Spouse ☐ Child

IF THE COST OF LODGING DID NOT INCREASE DUE TO THE ACCOMPANYING SPOUSE OR DEPENDENT CHILD, ONLY INCLUDE LODGING COSTS IN EMPLOYEE EXPENSES. (Attach additional pages if necessary.)

**Expenses for Employee:**

	Transportation Expenses	Lodging Expenses	Meal Expenses	Other Expenses (Amount & Description)
<input type="checkbox"/> Good Faith Estimate	\$485.27 total	\$157.00	\$74.84/person for 2 days	n/a
<input checked="" type="checkbox"/> Actual Amount	\$360.27 flights and \$125.00 ground transportation			

**Expenses for Accompanying Spouse or Dependent Child (if applicable):**

	Transportation Expenses	Lodging Expenses	Meal Expenses	Other Expenses (Amount & Description)
<input type="checkbox"/> Good Faith Estimate	n/a	n/a	n/a	n/a
<input type="checkbox"/> Actual Amount				

Provide a description of all meetings and events attended. See Senate Rule 35.2(c)(6). (Attach additional pages if necessary.):

Visit and discussion about entries in foster care with Judge Gray at Orleans Parish Juvenile Court; tour and discussion about services for at risk youth at Covenant House New Orleans; discussion about the court improvement plan (CIP) and prevention services with the Pelican Center for Children and Families; discussion about child welfare

in the state and innovations with the Louisiana Department of Children and Family Services; and a provider and constituent panel discussion about the Quality Parenting Initiative,

4/17/20

(Date)

Sarah Shapiro

(Printed name of traveler)

Sarah Shapiro

(Signature of traveler)

**TO BE COMPLETED BY SUPERVISING MEMBER/OFFICER:**

I have made a determination that the expenses set out above in connections with travel described in the *Employee Pre-Travel Authorization* form, are necessary transportation, lodging, and related expenses as defined in Rule 35.

4/17/2020

(Date)

(Signature of Supervising Senator/Officer)





January 14, 2020

Sarah Shapiro  
Legislative Correspondent  
U.S. Senator Chris Murphy  
136 Hart Senate Office Building  
Washington, DC 20510

Dear Sarah,

I would like to invite you to a one day educational site visit on Tuesday, February 18, 2020 to New Orleans, Louisiana to meet with judicial, state and local officials in New Orleans to learn about efforts to prevent unnecessary placement in foster care and strengthen families. The visit will include a look at the different roles of the state, courts, and community in supporting families, and how each works together in this effort. Casey Family Programs is the nation's largest private operating foundation focused exclusively on safely reducing the needs for foster care in this country and building communities of hope. We believe there is nothing more urgent than working together to ensure every child in this country has a safe, permanent family in which they can thrive.

I am attaching to this letter the draft itinerary for the trip, including the presentations and issues that will be addressed during this visit. Also enclosed is a completed Congressional Travel Certification Form.

New Orleans has seen a significant decrease in the number of children in foster care. This visit will highlight efforts of the court and state to reduce unnecessary entry into foster care and the trauma it can impose and increase permanency for children, and offer opportunities to discuss different approaches to keeping children safe and families together.

The trip will begin with a morning flight from Washington National Airport (DCA) on February 18 (boarding at 8:00 am) and will end with a flight back to DCA on February 19, 2020 (arriving to DCA at 11:00 am). Casey Family Programs will, in accordance with respective U.S. House and Senate Ethics Committees<sup>1</sup>, arrange for and directly pay for the costs for the flight to and from New Orleans and other travel-related costs, including transportation, lodging and meals while in New Orleans. Incidental expenses cannot be reimbursed.

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<sup>1</sup> As a private foundation, Casey Family Programs is also required to only pay federal per diem rates for Congressional Members or staff in accordance with Treas. Reg. 26. CFR § 53.4941(d)(3).



If you have any questions about this trip, please be in touch with me at 202-728-2001 or [ccalpin@casey.org](mailto:ccalpin@casey.org). Space is limited, so I look forward to hearing from you.  
Sincerely,



Christine Calpin  
Managing Director-Public Policy  
Casey Family Programs